Amendments to the Claims:

This listing of claims will replace all prior versions, and listings, of claims in the application:

Listing of Claims:

1. (previously presented) A method for treating chronic wounds in humans comprising:

providing a kit comprising a nonpyrogenic biocompatible microbial cellulose dressing and a moisture-proof package containing said dressing;

applying said nonpyrogenic, biocompatible cellulose dressing to a wound site;

wherein said microbial cellulose dressing consists essentially of from 1.5% to 4.5% microbial cellulose by weight and water, and wherein the wound dressing is capable of donating greater than 75% of its liquid weight to a dry or necrotic portion of said chronic wound and absorbing liquid in an amount effective for treatment of a chronic wound.

2. (previously presented) The method for treating chronic wounds of claim 1 comprising the additional step of:

changing the wound dressing once weekly.

3. (previously presented) The method of claim 1, wherein the wound dressing consists essentially of from 3% to 4.5% cellulose by weight.

4. (previously presented) The method of claim 1, wherein the wound dressing consists essentially of from 4% to 4.5% cellulose by weight.

5. (original) The method of claim 1, wherein said chronic wound is a full or partial thickness chronic wound.

6. (original) The method of claim 1, wherein the chronic wound is a venous ulcer.

7. (original) The method of claim 1, wherein the chronic wound is a pressure ulcer.

8. (original) The method of claim 1, wherein the chronic wound is a diabetic ulcer.

9. (previously presented) The method of claim 1, wherein the wound dressing exhibits a negative result in a Limulus Amebocyte Lysate (LAL) test of less than 0.5 EU/ml and is thereby nonpyrogenic.

10. (previously presented) The method of claim 1 wherein the wound dressing exhibits a negative primary irritation test in rabbits and a negative cytotoxicity test using marine L929 cells, and also passes a guinea pig sensitization test and is thereby biocompatible.

11. (previously presented) The method of claim 1 wherein the wound dressing donates 75% to about 95% of its liquid weight.

12.-18. (canceled)

19. (currently amended) The method for treating chronic wounds of claim 1 wherein said wound dressing is prepared by the steps of ~~A method for preparing a wound dressing comprising~~:

statically producing a microbial cellulose pellicle using *Acetobacter xylinum*;

isolating the pellicle with a cellulose to water ratio in the range of 1:100 to 1:500;

and drying the isolated pellicle to form a dressing consisting essentially of 1.5 to 4.5 wt.% microbial cellulose and water ~~and said dressing capable of donating greater than 75% of its liquid weight to a dry or necrotic portion of a chronic wound and absorbing liquid in an amount effective for treatment of a chronic wound;~~

~~placing said dressing in a moisture proof package; and~~

~~providing instructions for applying the microbial cellulose dressing to said chronic wound~~.

20.-25. (canceled)

26. (previously presented) A method of claim 1, wherein the wound dressing promotes autolytic debridement and removal of necrotic tissue in chronic wounds.

27. (previously presented) A method of claim 1, wherein the wound dressing performs better in cleansing wound margins and promoting epithelial migration compared to a non-adhesive gauze dressing.

28. (previously presented) A method of claim 1 wherein a lower median number of days are required to attain 75% or more granulation than for a chronic wound treated with a non-adhesive gauze dressing.

29. (previously presented) A method of claim 1, wherein a lower median number of days is required to attain 50% or more epithelialization than for a chronic wound treated with a non-adhesive gauze dressing.

30. (previously presented) A method of claim l, wherein the level of pain experienced by the subject associated with the wound, ranges from none to mild.

31. (previously presented) A method of claim 1, wherein the level of pain experienced by the subject is less than that which is experienced by a subject treated with a non-adhesive gauze dressing.

32. (canceled)

33. (previously presented) A method as claimed in claim 1, wherein the microbial cellulose wound dressing consists of water and from 1.5 to 4.5 wt.% of microbial cellulose, wherein the

wound dressing absorbs fluid exudate from a chronic wound and donates greater than 75% of its liquid weight to a dry or necrotic portion of a chronic wound.

34. (previously presented) An improved method of treating a chronic wound of a human subject where pain is associated with the wound, the improvement comprising applying a dressing consisting essentially of from 1.5% to 4.5% wt.% microbial cellulose and water to the wound of a subject in need thereof, which reduces the pain experienced by the subject compared to the pain experienced when a non-adhesive gauze dressing is used.

35. (canceled)

36. (previously presented) The method of claim 19 wherein said isolated microbial cellulose pellicle is purified by exposure at temperatures of 30 to 100 °C for about 1 to 4 hours.

37. (previously presented) A method for preparing a wound dressing comprising:

providing a nonpyrogenic biocompatible microbial cellulose dressing; said dressing consisting essentially of 1.5% to 4.5% microbial cellulose by weight and water, and wherein the wound dressing is capable of donating greater than 75% of its liquid weight to a dry or necrotic portion of said chronic wound and absorbing liquid in an amount effective for treatment of a chronic wound;

placing said microbial cellulose dressing in a moisture-proof package.

38. (previously presented) The method of claim 37 further comprising the step of providing instructions for applying the microbial cellulose dressing to said chronic wound.

39. (previously presented) A method for treating chronic wounds in humans comprising:

providing a kit comprising a nonpyrogenic biocompatible microbial cellulose dressing and a moisture-proof package containing said dressing;

applying said nonpyrogenic, biocompatible, cellulose dressing to a wound site selected from the group consisting of full or partial thickness chronic wounds, venous ulcers, pressure ulcers, and diabetic ulcers;

wherein said microbial cellulose dressing consists essentially of from 1.5% to 4.5% microbial cellulose by weight and water, and wherein the wound dressing is capable of donating greater than 75% of its liquid weight to a dry or necrotic portion of said chronic wound and absorbing liquid in an amount effective for treatment of a chronic wound.